



Account Application



Customer Information

Residential Account Commercial Account

Name _____ Home # _____
LAST FIRST MI

Address _____ Mobile # _____
STREET CITY STATE ZIP

E-Mail Address _____ Work # _____

Payment Information

Paid by:

Cash

Check - DL# _____

Credit Card

Card # _____ Expiration Date _____

Visa MasterCard Discover AMEX

Auto-Renewal Option - **Check to accept**

When my account reaches a balance of \$ _____ replenish with \$ _____ (**Min. \$25**) from the credit card above.

Authorization Signature _____ Date _____

Initial Deposit	\$ _____	(Min. \$25)
Sticker(s) # _____ x\$3.00	\$ _____	
Card(s) # _____ x\$6.00	\$ _____	
Total	\$ _____	

**Please
complete
application
on page 2.**



2220 Joe Mallisham Parkway
Tuscaloosa, AL 35401
Office: 250-752-2003
Fax: 250-752-2035
tbpoffice@tuscaloosabypass.com
Office Hours: Mon-Fri 8:30am-5:30pm

Completed applications may be mailed, emailed or delivered to the Tuscaloosa By-Pass office. Toll Attendants will not be able to accept applications in the lanes.

Alabama Freedom Pass Windshield Stickers require a \$3.00 activation fee. Alabama Freedom Pass Cards require a \$6.00 activation fee.

Please list the name and license plate number to be associated with each service you activate and indicate if you would like an Alabama Freedom Pass Windshield Sticker or Card.

Residential Account - Display Names

1. Display Name _____ License Plate # _____ State _____	<input type="checkbox"/> Sticker -OR- <input type="checkbox"/> Card	2. Display Name _____ License Plate # _____ State _____	<input type="checkbox"/> Sticker -OR- <input type="checkbox"/> Card
3. Display Name _____ License Plate # _____ State _____	<input type="checkbox"/> Sticker -OR- <input type="checkbox"/> Card	4. Display Name _____ License Plate # _____ State _____	<input type="checkbox"/> Sticker -OR- <input type="checkbox"/> Card

Commercial Account - Display Names or Vehicle ID Numbers

Please attach additional pages if necessary

1. Vehicle # or Display Name _____ License Plate # _____ State _____	<input type="checkbox"/> Sticker -OR- <input type="checkbox"/> Card	2. Vehicle # or Display Name _____ License Plate # _____ State _____	<input type="checkbox"/> Sticker -OR- <input type="checkbox"/> Card
3. Vehicle # or Display Name _____ License Plate # _____ State _____	<input type="checkbox"/> Sticker -OR- <input type="checkbox"/> Card	4. Vehicle # or Display Name _____ License Plate # _____ State _____	<input type="checkbox"/> Sticker -OR- <input type="checkbox"/> Card
5. Vehicle # or Display Name _____ License Plate # _____ State _____	<input type="checkbox"/> Sticker -OR- <input type="checkbox"/> Card	6. Vehicle # or Display Name _____ License Plate # _____ State _____	<input type="checkbox"/> Sticker -OR- <input type="checkbox"/> Card

Terms and Conditions effective July 3, 2017 (Please read before accepting). Terms and conditions are subject to change. These conditions apply between you and your primary facility hereinafter referred to as "The Facility". Terms and conditions apply to usage of all American Roads Facilities located in Alabama.

I am applying for an account with The Facility. I certify I am 19 years old or older and the information provided herein is accurate to the best of my knowledge. By accepting these terms, I understand any additional card(s) or decal(s) holders I authorize under my account will have access to detailed reports concerning the account usage and may request, and receive, a printed report if so desired. Once money has been put into my account I understand and accept that no credits or refunds will be issued under any circumstances. If I elect auto renewal of annual fees or pre-paid trip funds, I understand that it is my sole responsibility to request in writing or in person at The Facility sales office removal from these auto renewal programs, prior to the next renewal process. Once renewed, no refunds or credits will be issued. It is my responsibility to report lost or stolen card(s)/decal(s) or stolen or sold vehicles or license plates associated with my account to The Facility sales office as soon as possible. I understand that I must provide and keep current the license plate number and state associated with each service on my account. The Owner or Operator of the vehicle subject to the assessment and collection of a toll by an electronic system shall not pass the toll assessment point with their vehicle license plate either missing or obscured. All users of a toll facility agree that they are subject to Alabama Act 2017-375. Any charges made against lost, stolen, or sold vehicles or license plates will be my responsibility until I have notified The Facility sales office. I understand that such notification must be made either in writing or in person at The Facility sales office and I further understand that Toll Booth Collectors are not authorized to receive verbal notification or to modify accounts in any way. I understand that a replacement fee, established by The Facility, will be charged for all lost cards or decals. I am aware that any payments made by me which are declined by my bank may be subject to a \$30.00 collection fee. I also understand that the American Roads toll collection system is fully computerized, and in the unlikely event the automatic operation is out of service, I will not be able to use my Alabama Freedom Pass and will have to pay for each crossing until the computer system is back in service. The Facility reserves the rights to change, delete, limit, or modify, at any time, any terms of this agreement without advance notice. Annual membership fees and trip costs are subject to change. All Pass Cards and Window Decals, whether issued or not, remain the property of The Facility and, if requested, I agree to promptly surrender them to The Facility sales office. I understand that if my account remains unused for a period of three years or more, it may, at the discretion of The Facility, be closed and that any unused balance on my account is nonrefundable. I verify I have read, understand, and agree to the terms and conditions as set forth herein.

Applicant's Signature _____ **Date** _____